



| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2005</b><br><b>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</b>   |  | Docket Number (Optional)<br>07238/000J393-US0 |           |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
|---|--|---|-----------|-----|------------------|--|--|-------|------|----|---|-------|-------|----|--|--------|-------|-----------|--|--------|-------|----|--|--------|--------|----|
| Application Number  | 09/879,247-Conf. #2263   | Filed June 7, 2001                            |           |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
| For   | METHOD AND ELECTRONIC DATABASE SEARCH ENGINE FOR DISCLOSING AN ELECTRONIC DATABASE |   |           |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
| Art Unit  | 2173   | Examiner M. Roswell                           |           |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table> <thead> <tr> <th></th> <th>Fee</th> <th>Small Entity Fee</th> <th></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>\$120</td> <td>\$60</td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>\$450</td> <td>\$225</td> <td>\$</td> </tr> <tr> <td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>\$1020</td> <td>\$510</td> <td>\$ 510.00</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>\$1590</td> <td>\$795</td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>\$2160</td> <td>\$1080</td> <td>\$</td> </tr> </tbody> </table> <p> <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.<br/> <input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.<br/> <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.<br/> <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.<br/> <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>04-0100</u>. I have enclosed a duplicate copy of this sheet.     </p> |  |   |           | Fee | Small Entity Fee |  | <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | \$ | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$450 | \$225 | \$ | <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1020 | \$510 | \$ 510.00 | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1590 | \$795 | \$ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1080 | \$ |
|   | Fee  | Small Entity Fee                              |           |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))  | \$120  | \$60  | \$        |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$450  | \$225   | \$        |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | \$1020   | \$510   | \$ 510.00 |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$1590   | \$795   | \$        |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$2160   | \$1080  | \$        |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
| <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br/>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>47,698</u></p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34.<br/>Registration number if acting under 37 CFR 1.34 _____.</p> <p><br/>Signature</p> <p>Richard J. Katz<br/>Typed or printed name</p> <p>(212) 527-7700<br/>Telephone Number</p>   |  |   |           |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |
| <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of <u>1</u> forms are submitted.</p>   |  |   |           |     |                  |  |  |       |      |    |   |       |       |    |  |        |       |           |  |        |       |    |  |        |        |    |

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